Rutgers Around the World - Episode 11: Dr. Karen Lin - Global Profile

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HOST: The following is a production of Rutgers Global.

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HOST: Welcome to Rutgers Around the World, the podcast with the finger on the pulse of all things global at Rutgers!

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Today we hear from Dr. Karen Lin, a family doctor from Rutgers Robert Wood Johnson Medical School. Originally from Taiwan, Dr. Lin came to the United States for medical school, and now serves as the Assistant Dean for Global Health, is a member of the recruitment committee, and faculty advisor for the medical school. In this episode of Rutgers around the world, Dr. Lin talks about her experiences as a medical professional and her many roles within the global community. Thank you for joining us, Dr. Lin. So how long have you been at Rutgers?

DR. LIN: So it started when I came for Graduate school, and then it was my studies in medicine, and then it was three years of family medicine residency training. And then I became faculty for about 27 years.

HOST: Can you describe some of your roles at Rutgers for us?

DR. LIN: So I have multiple roles at Rutgers. One is Assistant Dean for Global Health at the Rutgers Robert Wood Johnson medical school. I am also the previous Program Director for residency program training and now I’m still the core faculty and under the recruitment committee to train the family medicine residents. I’m also the faculty advisor for many student groups, including the Promise Clinic, and the Medical Mandarin elective, Complementary and Integrative Health, the Physicians for Human Rights, and also the Asian-Pacific American Medical Student Association, so multiple roles for the residents and for the students. And I’m also the medical director for one of the Mandela Fellowship Institute programs.

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HOST: Tell us about your journey from Taiwan to Rutgers.

DR. LIN: I graduated from National Taiwan University in Taiwan, and then came here for environmental science to get my master’s degree, and then my husband came at the same
time, and then after the master’s degree, he continued to do the Ph.D. program. After he finished the Ph.D. then I started to do medical school. After medical school, I had my three-year training in family medicine residency here, and then I became faculty. And the reason we stayed here...so the transition was pretty exciting at the time. We lived at Stonier Hall on College Avenue, which is a dorm for all the graduate students. We met a lot of international students there too, so we ate at the Brower Commons dining hall, studied at Alexander Library, and watched TV to improve our English at the Student Center across the street. And then there is an International Student Center, which is a few blocks away, so we took the campus bus to Cook campus for our classes, so everything is just in the immediate walking distance. And then later on, we had our first daughter Angela, who was born actually when we lived in the Nichols Apartments on Busch Campus, so New Jersey has become our home, and so...we just never left.

[DR. LIN FADES OUT, MUSIC FADES IN]

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HOST: What medical and study abroad programs have you worked with?

DR. LIN: You probably know that before 2013, the medical school was separate from the Legacy Rutgers University, and so our Office of Global Health was in the elementary stage and then, at the time, I was arranging our medical students to do the Global Health elective during the summer abroad or even inviting the faculty to come over here. So starting 2011, I have been involved with the Global Health office. And then after the medical school and Rutgers University merged in 2013, I actually got exposed to the leadership of Rutgers Global today. At the time, it was the Center for Global Advancement and International Affairs, so I started to learn that Rutgers actually has a lot of MOU’s with different institutions all over the world, and so it gives us the opportunity to travel with the faculty of Rutgers, and then be able to develop a program with a medical school or a health science institution. And so at the time, also in Asia, like in China or Indonesia, they all recognized the need to develop primary care. What we call family medicine here is actually relatively new over there, because over there, it is more of a sub-specialty care, and since then, the government all want to learn about this. And at the time, I was the program director for family medicine residency, so it’s natural that I was able to share my experience in medical education and strategies with them. So I was able to develop some programs there.

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HOST: Can you talk about your involvement with the Mandela Washington Fellowship?

DR. LIN: So the Mandela Washington Fellowship, some of you may know, was actually started by President Obama. And so, it invites the young leadership from Sub-Saharan countries in
Africa, to come to the United States. I remember the very beginning, probably less than 20 universities got involved, now it’s more involved. So Rutgers, in the beginning, we hosted about 25 fellows and now it’s 50 fellows, and they divide it into 2 groups; one is the civic leadership group and the other one is business entrepreneurship. And so as you can imagine, one of the most difficult things to encounter for the international travelers is when they get sick. So they feel the need for, either it’s outpatient care or inpatient care, needs somebody who can oversee the whole thing. So I began to work with them in 2015. They usually stay at Rutgers for 5 weeks, and then go to Washington DC for one week, and so there’s never a dull moment. Either it’s losing their teeth or pregnancy-related problems, and then one year, we even had somebody who had a fracture, so we actually have to coordinate with the healthcare team in Washington D.C. to make sure this person can have all the procedures and everything.

[DR. LIN FADES OUT, MUSIC FADES IN]

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HOST: Can you tell us about the Health Passport Project?

DR. LIN: So in 2017, I received a seed grant from Rutgers Global Institute. And so one of the medical students who just graduated this year, Aisha Van Pratt Levin, because of her personal experience when she grew up in Tijuana, Mexico, they actually have this program, a little booklet, that would have everything recorded, and it’s easier for them to communicate with family members, caretakers, or even the healthcare providers. And my hope is we can continue with this and then provide beyond the people for Promise Clinic, and a lot of people in the New Brunswick area can benefit from this little booklet.

HOST: So what is the HIPHOP Promise Clinic and how did it start

DR. LIN: The HIPHOP Promise Clinic actually is a student-run free clinic, and about 13 years ago it actually started with medical students. They did a community-need assessment, and at the time, the client of Elija’s Promise, which is a soup kitchen, a few blocks from here. They are mostly homeless and they don’t have health insurance so they don’t go to the doctors on a regular basis and then whenever there’s a problem, they just go to the emergency room. So in the past, the program director told me they often just see the ambulance come every week, and then since there’s this need, this student-run free clinic was established then. And so the medical school actually sponsored all the medication, the tests, so it’s free to the people in need. Inside, since it’s a student-run besides myself, is a faculty adviser, we also have Dr. Eric Jan, who is a Senior Associate Dean for community in medicine, that we help supervise. We open every Thursday evening from 5:30 to 8:30, and then we provide continued care. So the difference between this and the emergency room is one patient would be followed by the same medical student for 4 years when they are here, and each team doctor has one first-year, one second-year, one third-year, one fourth-year, so the third and fourth-year medical students have the responsibility of teaching the first and second-year.
DR. LIN: Every month we also have a free eye screening because people who have diabetes or have hypertension, they tend to have problems with the eyes. And so we also try to take care of them if they have a dental problem, and then I also have several different kinds of grants that sometimes can offer them to have the vaccine for influenza and for pneumonia. I don’t know that, you know, that people probably take for granted that we have insurance. So one flu shot we give them every year starts from September to March, and each shot is more than $35. And then anyone over the age of 65, they all need to receive two different kinds of pneumonia vaccine, and each vaccine costs more than $100. So it’s really impossible to do, to practice preventive medicine for this population. So that’s why with this Health Passport Program, we have some of the budget set aside to provide the vaccine.

HOST: Are there any formal relationships with National Taiwan University and Rutgers?

DR. LIN: I believe Rutgers Global, there are 250 MOU’s, one of them is assigned with the National Taiwan University. So their student, actually, will come here and our student will go there so there is a formal program.

HOST: What kind of medical training programs have you conducted with Rutgers.

DR. LIN: Like I said, Rutgers University has a very robust study abroad program already, and our medical school is just catching up, but I have found that there is an advantage when I learn from Rutgers Global. So wherever they go, if I happen to be with them, they will develop a program with the medical school. There are people who want to come here to have training, and so so far, we have trained the global geriatrics because there are more people who want to develop long term care facilities or nursing home assisted living, and so I have had training for the administrators, the doctors, and then just at the end of last year, we had training for the nurses. And then I worked with the School of Nursing, and so they stayed here for three months, and this is the training because in China, most nurses are trained to work in acute hospital settings, and so there’s no formal training for the people that work in long term facilities, so they come here for that training.
these roles. For example, when I provide care, good care to my patients, and with patients they really appreciate that and they also learn my role to get involved in the community. So sometimes, I was able to motivate them to also help me with the community role. When I supervise them, all those wonderful programs are not all my ideas; it's the student brainstorm. So when I have my educator's role, I also can enjoy working with them on the scholarly project, so really this is all intertwined. I think that compared to the physician who is not in the academic setting, I think that I really have a much more rich experience.

HOST: In a global perspective, how do you think the world sees Rutgers?

DR. LIN: So I think the personal relationship is important. That's how I was able to develop many programs that they used to send people to those Ivy League schools, and now they recognize that when they come here, we actually can design and tailor the program to their needs. And they are not just observing, even when the medical student comes here to take Global Health elective, that I really designed to-, it's not that they are just following me like a shadow, and so the personal relationship is important. And I think Rutgers Global can really cultivate this personal relationship, and obviously Rutgers gives us a good platform, and then when they provide opportunities for the faculty to go outside to explore, we can bring those into here. So, believe it or not, many places like in Taiwan, there's a Rutgers alumni association. In China, there's a Rutgers alumni association. So Rutgers is a comprehensive university, and you know with all their areas, people start to recognize. And that's why last year and this year, we have a lot of requests come from biotech, the university, corporate partnership, and stuff like that. So we should really utilize and expand our specialty here.

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HOST: If you could improve anything about Rutgers, what would you say that would be?

DR. LIN: We would do more training programs to train the trainers, and then we will bring, nowadays, with telemedicine, we can offer more to the people outside so they don't have to all come here, and even for teaching, we can do Webex and stuff like that. And so, I think there is still a lot of work to do. Also, that's where we can learn from others because when they come to this country, they probably want to see the most advanced technology. But there is something, sometimes that's missing, because in other countries, you will find out they have the money to buy all the machines, all the equipment, but they don't necessarily have the patient-centered medicine training, and so whenever we are doing training here for people outside, I always emphasize that because the human factor is still important. And so to me, I feel I still have a lot, you know, I can still contribute to the medical education for the residents and the medical students.

HOST: Thank you to Dr. Lin for sharing her experiences with us. For more information on Dr. Lin's story, be sure to visit our website at global.rutgers.edu.
HOST: That’s all for this episode of Rutgers Around the World. Join us next time as we discuss all things global with members of the Rutgers community. Thanks for listening.